U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 1/573	2. Fiscal Year Covered From:			
v	1 / 1 / 2004 Through: 12 / 31 / 2004			
3. Name and address of person filing.	4. Name, file number, and address of labor organization.			
Name James D Hornacek	Name   IBEW Local Union 306			
	Labor Organization File Number 007-531			
P.O. Box, Bldg., Room No., if any Suite 200	P.O. Box, Building and Room Number, if any Suite 200			
Street 2650 S. Main St.	Street 2650 S. Main St.			
City Akron	City Akron			
State Ohio ZIP Code + 4 44319-1883	State Ohio ZIP Code + 4 44319-1883			
5. Position in labor organization.  Recording Secretary				
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.				
	on represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.			
6. Name and address of Employer (including trade name, if any).	Income:			
Name Akron Area Electrical JATC	Instructor's Salary 9 months \$ 6,305.60			
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any Suite 100	7.b. Amount.			
Street 2650 S. Main St.				
City Akron	\$6,,306			
State Ohio ZIP Code + 4 44319-1883				
Signature				
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)				
Signed Jan D. Hank	On 8-13-04 330-245-2240 Telephone Number			

Name of Person Filing James Hornacek		File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any).  Name Akron: Area Electrical JATC  Trade Name, if any:  P.O. Box, Bldg., Room No., if any Suite 100  Street 2650 S. Main St.  City Akron  State Ohio ZIP Code +4 44319-1883	9. Business deals with:  a. Labor Organiza  b. Trust  c. Employer	tion			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.				
Name Akron Area Electrical Joint Apprenticeship a  Trade Name, if any:  P.O. Box, Bldg., Room No., if any Suite 100  Street 2650 S. Main St  City Akron  State Ohio ZIP Code + 4 44319-1883	Instructor's Dinne  11.b. Approximate dollar valu  12.a. Nature of interest hele	e of such dealing.			
	12.b. Amount.	Leading and republish along Linker damated in this formula is a constraint of the co			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.					
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.				
Name					
Trade Name, If any:					
P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4					
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.				

Name of Person Filing Jame	s Hornacek	File Number U

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	-	
Name Akron Area Electrical JATC	a. Labor Organization		
Trade Name, if any:	a. Laber organization		
P.O. Box, Bldg., Room No., if any Suite 100	b. Trust		
Street 2650 S. Main St.	c. Employer		
City Akron			
State Ohio ZIP Code + 4 44319-1883			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name Akron Area Electrical Joint Apprenticeship a	Graduation Banquet 09/24/2004	\$88.00	
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any Suite 100			
Street 2650 S. Main St.			
City Akron			
State Ohio ZIP Code + 4 44319-1883	11.b. Approximate dollar value of such dealing.	\$88	
	12.a. Nature of interest held or income received.		
	12.b. Amount.		